

liable to be violently affected by the same cause, than an individual not exposed to such agents. In this manner, we can readily account for those cases, which have been attributed to infection, &c. on the supposition that the disease is meteorological.

The remaining pages of this pamphlet are occupied principally in detailing the evidence of the existence of malaria in many places where cholera has prevailed. All these we admit, and many more facts of the same kind could be adduced. But they are far from establishing the doctrine for which the doctor contends; and they only prove that certain extraneous causes powerfully aid in the development of the disease. Notwithstanding, however, the animadversions which we have felt it our duty to offer, we have a high regard for the author's zeal and talents, and trust that they will long be employed in the advancement of medical science.

C. A. L.

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XV. *A Catechism of Medical Jurisprudence; being principally a Compendium of the opinions of the best Writers upon the subject. With a Preliminary Discourse upon the Importance of the Study of Forensic Medicine. Designed for Physicians, Coroners and Jurymen.* By STEPHEN W. WILLIAMS, M. D. Late Professor of Medical Jurisprudence in the Berkshire Medical Institution; Fellow of the Massachusetts Medical Society, &c. Northampton, 1835. pp. 205. 12mo.

A popular manual of Medical Jurisprudence has been much wanted in this country, and we therefore felt great pleasure when the present volume was placed in our hands, entertaining the fullest expectation, from the high and responsible station so long occupied by the author, and from the strong recommendations appended to his work, that this desideratum would be amply supplied. We regret, however, to be obliged to say, that we have been greatly disappointed. This disappointment may have arisen in part, from our entertaining an erroneous conception of the object of medical jurisprudence,—which the author states, “is to point out to the physician those cases of real or supposed crime, on which he may be called to give his professional evidence in a court of justice,”—and also of what constitutes “the principal facts in the science, which may be wanted in judicial examinations;” partly from our misapprehending the author's views in many cases, his text being often extremely obscure; and partly from our attaching some value to the splendid discoveries in chemistry, and the advances made in medico-legal science within the last twenty years. To enable our readers, however, to draw their own conclusions on some of these points, we will subjoin a few of the many passages we have noted on a hasty perusal of the work, which we think will enable them to judge whether or not it can be relied on as a guide in judicial examinations.

The definition of *sudden death*, viz. “the death of a person, either from some apparent cause, or not, which has no connexion with personal interference,” applies to all cases of natural death, whether sudden or otherwise, and is therefore manifestly inaccurate.

The author has committed a strange blunder or inadvertence in his definition of *felv de se*, in making suicide and felony synonymous terms; now, although by the English law suicide is a felony, it by no means happens that every felony is a suicide.

In speaking of the Cæsarian section, the author, after stating that this is to be performed when the mother dies in labour and undelivered, in order to preserve the child, goes on to say, that we ought to be absolutely certain that the woman is really dead, and gives as a criterion of this, the occurrence of putrefaction and decomposition. Now, we would ask, what chance exists of saving the child, if the appearance of these chemical phenomena be waited for? The operation, to effect the desired end, we have been taught, must be resorted to, as soon as possible after the decease of the woman.

But this is not all; in the next question he asks, "if a woman die in parturition, what are the signs by which we can determine that the child is dead?" which he answers as follows:—"Recession of the milk—flaccidity of the breasts—coldness of the abdomen—mechanical weight of the uterus—want of motion in the child—fætor in the room of the patient—fætor of the discharges." Now, these may be excellent guides to a correct determination, during the lifetime of the woman, but how they can be such in a corpse, it is for the author to explain.

*Rape.*—The author states, that to constitute a rape, emission as well as penetration must be proved. This is not the case in many of our states, and even in England, where the laws are much more severe as regards this crime; it is a question *ad huc sub judice*. The author also decidedly affirms, that a rape cannot be committed on a female, except she be under the influence of narcotics, or that three or four persons be engaged in restraining her. This is going too far, for though it may be taken as a fact, that a female cannot be violated, in the true sense of the word, unless her powers of resistance be completely overcome; numerous instances are on record, where this has been effected by one man, as females have been incapable of resistance from fear, from debility, &c. Dr. Williams also thinks that it is unlikely that pregnancy would ensue on a rape, as the lust of the woman was not excited. He is here at variance with a majority of the profession, who are decidedly of opinion that conception has nothing to do with the volition of the female; at the same time it should be stated, that his views are supported by general prejudice, and by some esteemed writers, as Farr, &c.

*Pregnancy.*—We are unable to comprehend the meaning of the following question and answer. "In what cases is it difficult to determine between amenorrhœa and pregnancy in prostitutes?" Unless indeed he means that a cessation of the menses is a more uncertain symptom of pregnancy in them, than in other females. But the answer to the question, of "how are we to determine when a woman is in labour" is still more defective, viz. "a woman cannot be delivered without great pain. No one can counterfeit labour pains, nor conceal them when felt, &c." Now, every practitioner of midwifery must have met with cases where females have suffered but little pain during labour, and every work on infanticide contains records of cases where the existence of this phenomenon, even when attended with great pain, was unsuspected by persons living in the house.

We shall conclude our quotations and remarks with the section on *Poisons*, as in this the greatest accuracy and precision is requisite, and we are sorry to find that it is far from fulfilling these conditions.

The author first defines poisons to be "substances which, being taken in the

stomach in small quantities, are capable of destroying life," and on the next page states, that they may be introduced into the system, by the nostrils, mouth, lungs, anus and skin. The answer to the question, "in what state are metals most poisonous?" viz. "in the state of an oxide," and to that "what is the cause of the causticity and poison of a metal?" viz. "oxygen combined with it;" are defective, and calculated to give very false impressions. Had the first answer been, in the state of oxides and the salts of those oxides, it would have been more consonant with the true state of the case: as regards the answer to the latter question it is erroneous, as the oxides of many metals are neither caustic nor poisonous.

The directions for removing the stomach for the purpose of a chemical examination of its contents, are also erroneous, as they order the stomach to be taken out, and then its orifices to be secured by ligatures, instead of this latter operation preceeding the former. The morbid appearances produced by arsenic, instead of being described from Christison, or other late and standard authors, are quoted from Dease, one of the worst authorities that could be selected on the subject of poisons, and are not to be depended upon. But what is still more extraordinary in a work which professes to "obviate the necessity of resorting to more voluminous works," no test for arsenic is given, except that of the chromate of potash, as recommended by Cooper.

In speaking of mercury, the author enumerates turpeth mineral as one of the oxides or chlorides of this metal, whereas it is a deuto-sulphate.

We were for a long time greatly perplexed with the following question and answer, "what (are the antidotes) for the other mineral poisons? *Answer.* Nearly the same as for arsenic. The sulphates of soda and magnesia are the chief antidotes." Now as the *other* mineral poisons includes nine-tenths of the metallie salts and oxides, and all the alkaline earths, we could not understand how those sulphates were to act; but on referring to Male's epitome, from which much of the section on poisons is copied, we find that this author refers to the carbonate and muriate of barytes, for which these salts may prove a good antidote. In speaking of the treatment for an over-dose of opium, the author, after placing the most efficient, namely, the stomach pump at the foot of the list, advises among other things vinegar and lemon juice; now both these articles, if taken whilst the opium is in the stomach, cannot fail of aggravating the evil, as they will unite with the morphia, and form a citrate or acetate. After the complete removal of the poison, there is no doubt that they are extremely grateful to the patient, and tend to allay the irritation of the mucous membrane; what we object to, is, advising them as remedies to counteract the poison.

The section on wounds contains much in which we do not agree with the author, but we shall merely notice the following. Among his diagnostics of wounds penetrating the thorax, is—"no air being discharged by any means, by the return of liquors being injected warm when the body is placed in the same posture, as it was when it received the wound"—we confess we are at fault, except he alludes to wounds of the thorax after adhesive inflammation of the lungs had taken place, or to wounds of this part not implicating the lungs. He next states that emphysema takes place, from the wound in the lungs being of small size, and entering in a *direct* line; any comment on the latter clause of this explanation would be superfluous.

But we have pursued our painful task to a greater length than we at first in-

tended, but the questions discussed are of so much importance, and the consequences that might result from an implicit reliance on some of the precepts inculcated are of so serious a nature, that we have felt it to be an imperious though an invidious duty to endeavour to point out what we consider to be errors of fact as well as of doctrine.

R. E. G.

XVI. *The American Cyclopædia of Practical Medicine and Surgery; a Digest of Medical Literature.* Edited by ISAAC HAYS, M. D. &c. &c.

The sixth number of this interesting work was issued in January. It appears that the enterprising publishers have not been able to furnish the numbers as regularly as was anticipated, in consequence of the many difficulties that necessarily attend the commencement of a work of great magnitude, in which many authors are concerned. If, however, we are induced to complain of this delay, we are at the same time constrained to acknowledge that the additional interest given to the work by the well executed illustrations, and the better opportunity it affords for elaborating the articles, fully compensates for this tax upon our patience.

It is not our intention, on the present occasion, to notice in detail the articles contained in the number before us; but in announcing its publication, we would merely call the attention of our readers to some of its most important articles. The contributors to this part of the Cyclopædia are Drs. G. B. Wood, R. E. Griffith, R. Coates, E. Geddings, F. Bache, S. Jackson, and the editor.

Dr. Wood is so well known as a writer on *materia medica* that it seems unnecessary for us to commend the articles bearing his signature. They display considerable research, and are generally written with that regard to system and accuracy which the present state of our science requires. He is the author of *Angustura Bark*, *Anime*, *Anodynes*, *Anthelmintics*, *Anthemis*, *Antilethics*, and *Antispasmodics*.

*Anise*, and *Antirrhinum*, by Dr. Griffith, *Anthropology*, by Dr. Geddings, and *Anthropogenics*, by Dr. Jackson, are very concise and neat articles.

The articles *Ankle*, *Anthrax*, and *Anus*, are from the pen of Dr. R. Coates; and are highly creditable to their author, particularly the elaborate articles *Ankle* and *Anus*. Dr. C. has given us a full exposition of the present state of our knowledge upon these interesting subjects. We have devoted no small portion of our time to anatomical studies, and therefore read this part of his labours with especial interest, and we have no hesitation in declaring that we have never met with accounts of the surgical anatomy of the ankle joint, and of the anus so satisfactory as those which Dr. C. has given us. The style in which these articles are written, though occasionally abrupt, is precise and perspicuous.

The "mechanism of the injuries of the ankle" is a most interesting and well written section. It describes, in a clear and simple manner, the complex motions of the foot upon the peroneo-tibial and tarsal articulations. Until recently the study of the mechanism of the joints, and their moving powers, has been too much neglected by surgeons. If more attention had been paid to this subject, we should not have been so often misled by the discrepancies of surgical writers. Dr. C. has fully appreciated its importance.